



Wollaston Child Care Center

A Community Service of Wollaston Lutheran Church



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Mission Statement

Based on Judeo-Christian principles that enrich the spiritual, mental, physical, intellectual and social life of children, families and the community, Wollaston Child Care Center will provide a safe and responsive environment that supports and nurtures the development of each child's physical, social, emotional, and cognitive capabilities. Viewing the "whole" child is paramount to WCCC faculty and staff.

Statement of Purpose

Wollaston Child Care Center is a multicultural, non-bias program owned and operated by the Wollaston Lutheran Church, 550 Hancock Street, Quincy, MA 02170. It is a nonprofit organization, fully licensed by the Department of Early Education and Care. Respecting and responding to the diverse needs of the community, WCCC is dedicated to providing families with quality child care for children 15 months through 7 years of age, regardless of age, sexual orientation, cultural heritage, religion, political beliefs, race, national origin, marital status, income or ability.

A child's participation in the program is not based on his/her ability to care for their personal needs.

Philosophy Statement

We believe that parents and other family members

- ✚ Influence all aspects of a child's development.
- ✚ Are vital to the well-being of every child.
- ✚ Protect and advocate for the child.

We believe that the family environment

- ✚ Influences all aspects of a child's development from conception.
- ✚ Encourages and supports learning.

We believe that children learn best when they

- ✚ Are not hurried or over stimulated.
- ✚ Feel safe and secure.
- ✚ Have access to comforting, caring and loving caregivers.
- ✚ Are supported when they achieve and are encouraged to take risks.
- ✚ Are given the opportunity to explore and learn about people and the world.
- ✚ Have ample and varied opportunities to play alone and with other children.

We believe that the ideal learning environment for the young child

- ✚ Offers choices that help him or her learn about the process of decision-making.
- ✚ Challenges thinking and wondering.
- ✚ Respects and welcomes the life experiences of the child.
- ✚ Provides aesthetically pleasing, inviting organized surroundings.
- ✚ Requires trained and knowledgeable Early Childhood Educators.

We believe that the materials for children's learning should

- ✚ Be varied and plentiful but not excessive.
- ✚ Be versatile.
- ✚ Inspire creativity and original thinking.
- ✚ Stimulate problem solving.
- ✚ Serve multiple purposes.
- ✚ Provide children with the opportunity to work as a group, learning to respect and cooperation.

We believe the role and function adults/caregivers have in children's learning is

- ✚ To facilitate and guide, not dominate.
- ✚ Tuning in and responding to their ideas and interests.
- ✚ To ask open-ended questions that generate conversation instead of one-word replies.
- ✚ To engage the child as an equal participant in the thinking process, not just as a recipient.
- ✚ To talk with children about their own ideas and interests.
- ✚ To respectfully interact with each child based on an understanding of his/her potential.
- ✚ To view the child as innately competent.
- ✚ To plan appropriately for children's needs, building on the child's experiences.

The Programs Philosophy of the Written Curriculum

- ✚ We believe that families are the primary caregivers and educators of their children and influence all aspects of the child's development.
- ✚ We believe staff and families should work together to ensure that every child is provided with the best possible learning experiences.
- ✚ We believe that all young children are capable of learning.
- ✚ We believe all children have individual differences in their development and that milestones are achieved in different ways and at different times.
- ✚ We believe that the knowledge of early childhood growth and development is essential to program development and implementation.
- ✚ We believe that a child's language skills are the predictors of their academic success and that a child must be proficient in their primary language before acquiring second language skills.
- ✚ We believe that all developmental domains are interrelated and greatly influence all aspects of the child's ability to acquire knowledge.
- ✚ We believe that children learn through exploration and discovery, while being allowed to interact with their environment, through a balance of child-initiated and teacher-initiated activities.

Goals and Objectives

Wollaston Child Care Center will provide:

- ✚ A safe and healthy environment that respects and nurtures children's natural inclination to be curious.
- ✚ Experiences for children to refine and acquire skills and competencies.
- ✚ Opportunities where children can build on experiences that are linked to past accomplishments and satisfactions.
- ✚ Informal/formal opportunities for family/staff communications regarding all aspects of the child's experiences.
- ✚ Various educational/social experiences to meet the needs of the families and the community.
- ✚ Valued play experiences, which are essential to the development of young children.

Children's Assessments

Within 45 days of enrollment, all children will be screened using the Ages & Stages tool. Any concerns will be discussed with families to identify supports needed to help each child reach his or her potential.

Teaching Strategies GOLD is used by the classroom teachers to document children's progress and development over time. The staff will gather information to document children's progress across 38 Objectives for development and learning. The 38 objectives at the heart of Teaching Strategies GOLD guide teachers

through the assessment cycle, helping them to link observable behavior to essential early learning requirements and predict likely next steps in every area of development and learning. Information is gathered via informal observations, photographs, and examples of children's work. This information is used to identify strengths as well as individual and group goals. This information is also used to inform curriculum planning.

You will receive an assessment three times a year (every three months for children with disabilities). We encourage you to ask questions and discuss the assessment with your child's teacher. Your input is crucial as we set goals for your child. Once you receive your child's assessment, we encourage you to set up an appointment to discuss your child's progress in more depth.

Services Provided

- ✚ We offer full and part time full day programming based on the needs of our community.
- ✚ We offer a curriculum designed to foster children's growth and learning in all developmental domains.
- ✚ We offer enrichment programs including a Mandarin Class and a Bible stories program for our preschoolers.
- ✚ We provide a nutritionally balanced morning and afternoon snack and beverage.
- ✚ We have a Health Room where children who become ill, while at the Center can be made comfortable as they await for their parents.

Admissions Procedure

A hallmark of the WCCC program is a personalized and individualized approach. The tour of the facility and interview will be scheduled for forty-five (45) minutes at a mutually convenient time. During the tour and interview, you will also have an opportunity to ask questions. At that point, you will have an opportunity to begin the registration process, thereby securing your child's enrollment in the program. Participants are enrolled on a first come, first serve basis. If you decide to return at another time to complete the process, we will be unable to reserve your placement until the registration forms and fees have been submitted.

To begin the registration process simply fill out the forms and submit a \$100.00 processing fee, along with the first and last week of tuition. This deposit is non-refundable. At that point, you will have secured your child's placement and a date will be set for your child to enter the program. In the best interest of the children and our Center, short-term participation in the program will not be considered.

Every child will be admitted on a two-week trial basis. If at the end of the trial period we feel it is not in the best interest of the child to continue to participate in our program, the last week of tuition will be refunded to the parent/guardian.

It is mandated by the Department of Early Education and Care that every child must have an updated yearly physical on file at the Center. Every child must be fully immunized before being admitted to the program, including one lead paint screening. It is the responsibility of the parent/guardian to update the physical as needed. We will allow a grace period of 30 days to update documentation once the physical is outdated. Failure to comply with this state regulation will result in suspension from this program, until the physical has been updated and the documentation has been placed in file.

No child will be admitted until all necessary forms and tuition payments have been received.

There will be a tuition rate increase at the beginning of each year for all Programs.

Our hours of operation are from 7:00 a.m. to 6:00 p.m. for the Preschool and the Toddler Classroom is open from 8:00 a.m. to 6:00 p.m. Each full day is based on ten hours per day to allow our parents ample time to get to and from their work place. Parents are welcome to have their children attend the entire day or whatever part of the day that suits their needs. To attempt to meet the needs of our families, children are welcome to arrive anytime between 7:00 a.m. and 11:00 a.m. **All children must arrive by 11:00 am.**

Tuition is based on an annual fee including two weeks of tuition free vacation. No refunds or adjustments will be made for illnesses, days absent, snow days, or holidays.

Tuition must be paid by check or money order made payable to Wollaston Child Care Center (WCCC). There will be a \$25.00 (twenty-five dollar) charge for any check that is returned. After two returned checks, tuition must be paid with a money order or bank check. Cash will not be accepted.

Tuition payments may be made weekly or monthly basis (number of Mondays per month x your weekly rate). Weekly tuition payments are due on Thursday for the following week. *Payments that arrive after Friday evening will automatically be assessed a late fee of \$10.00 (ten dollars).* Monthly tuition payments are due the last Thursday of each month for the following month.

Whenever the status of your child's schedule changes due to an increase in participation, you must also increase the amount that secures your last week of tuition.

No student's account may have more than one week's tuition outstanding at anytime. A termination notice will be issued if payment is not received on the scheduled day of payment. The effective date of the termination notice will be reflective of the last week's tuition. Failure to pay tuition will result in termination from the program.

We strive to maintain a low ratio of one teacher to each grouping of nine children throughout our Center, excluding the Toddler Program, which has a one-to-four ratio. As the city of Quincy now offers full-time Kindergarten, we will not offer a Kindergarten Class each year unless we have a minimum of 15 children registered for the following September. Due to the limited space available in our Kindergarten Classroom, first priority will be given to families already participating in our program. Registration will begin in February and will be open to the general public in March. It is important that you inform us of your intentions prior to the date that registration is open to the public in order to secure your child's placement and a deposit equal to one week of tuition must be received by the Center.

Participants of the Voucher Programs

We request that you pay the first and last week of your voucher co-payment on/or before your child's first day of participation. Tuition payments must remain current.

All participants in voucher programs are responsible for renewing their voucher agreements two weeks prior to the ending date of the voucher. Services will not be extended past the ending date without verification of an extension from your voucher organization. Should you miss your appointment, be aware that your voucher will not be back dated and you will be responsible for the full tuition payment between the ending date of your voucher and the starting date on your new voucher.

In compliance with your voucher agreement, you are allowed thirty excused absences in a six month period and after three unexcused absences your voucher will be terminated. An absence is excused when you call the Center to report that your child will not be participating. An absence is considered unexcused when a parent/guardian does not call in a child's absence from the Center. The two-week vacation period mentioned in this Policy Handbook is not extended to voucher participants.

Classroom Visitations

It is the policy of WCCC that every child has an opportunity to visit their assigned classroom prior to their first day of enrollment. It is extremely important for the well being of the child to be introduced to their classroom environment in gradual stages, while in the company of a parent/guardian. We strongly advise families to plan on scheduling at least two, two-hour classroom visits, at a time when the children are actively engaged in the daily routines. A parent must remain within the classroom and participate with their child in the classroom activities. Once the parent feels that their child is ready to participate independently, the parent may wait in the Family Room; however, they are not allowed to leave the building.

Often times a child that has never been away from their family may have a more difficult time adjusting into the classroom setting, therefore we advise parents to trust their own instincts as they prepare their child for enrollment into the program. You may wish to schedule three or four visits prior to your child's first day. On the other hand, some children may be coming in from other programs, or may adjust quickly to new settings. By working together as a team, we will support both you and your child through this adjustment period.

Transportation Plan

Parents/guardians are responsible for transporting their child/children to and from the Center each day. There is fifteen minute parking available on the uneven numbered side of our street, which is the same side of the street where our Center is located.

Please let us know if you need assistance in finding a suitable place to park.

Please be aware that there is no parking allowed in our driveway! It is reserved for staff parking only.

When field trips are scheduled that require transportation, the Center staff will arrange for a private carrier, i.e. Ryder Transportation or Quincy Public Schools Transportation Department.

In the event transportation is necessary for emergency evacuation the Center will use public transportation arranged by Quincy's Emergency Management Department.

Vacations

Each family is entitled to two-weeks of tuition free vacation. Vacation must be taken in weekly blocks. You are eligible for one week after three months, the second after six months. Please give the Administrative Director written notice before taking vacation time. The adjustment for two weeks of vacation is built into the yearly fee.

Calendar

Our program is open year round from 7:00 a.m. to 6:00 p.m., Monday through Friday, except for the following holidays:

New Year's Day	Labor Day	December 24 th (close at 12:00)
Martin Luther King Day	Columbus Day	Christmas Day
President's Day	Veteran's Day	December 31 st (close at 12:00)
Memorial Day	Thanksgiving Day	Patriot's Day (professional development day for staff)
Independence Day	Friday after Thanksgiving	

Holidays which fall on Saturday will be observed on the preceding Friday: holidays which fall on a Sunday will be observed on the following Monday. December 24, 26, and 31 will only be observed if they should occur Monday through Friday. **The days are subject to change, please refer to that year's holiday schedule.*

Pick Up Policy

Anyone who will be allowed to pick up your child must be named on the Authorization and Consent Form. No one under eighteen years of age will be allowed to be named on the form. *Persons arriving to pick up a child should be prepared to show proper identification at all times.*

If a parent/guardian is unable to pick up his/her child at the appointed time, she/he is expected to notify the staff. If the parent/guardian does not pick up the child by the designated time and cannot be contacted, the staff will attempt to notify the emergency contacts. One hour after closing, when all attempts to notify parents, guardians, and other emergency contacts fail, the staff will notify the local authorities and DCF.

Any parent/guardian arriving after closing time will be charged a fee of \$10.00 for the first ten-minutes they are late and will be charged one dollar for each additional minute thereafter. ***The late fee will be calculated at the time you exit the building, as it often takes five to ten minutes for families to gather their children's belongings before exiting.*** That fee is due by the end of the week and must be paid directly to the staff that was on duty regardless of the reason for the late pick up.

No child will be left unattended.

If a parent/guardian fails to pick up their child before the Center's closing more than three times within a six-month period, the Center reserves the right to cancel the late pick up privilege, or may deem it necessary to terminate services. If an authorized person arrives at the Center to pick up a child and the staff has any

reason to question the ability of that person to function in a responsible manner (i.e. due to the influence of alcohol or drugs, or apparent emotional instability), therefore, placing the child at risk, the following procedure will be followed:

1. A member of the Administrative Team will be called into the Center to assist in evaluating the situation.
2. It will be decided whether the child will be released to the adult or another person from the pick up list will be contacted to pick up the child.
3. If no other adult from the pick up list can be reached, the police will be called in to evaluate the situation.

Any time it is decided that someone else needs to be contacted to pick up the child, the Department of Children and Families will be called and a written report will follow within 48 hours.

Transitions

Classroom Daily Transitions:

- ✚ As children arrive in the classroom, count is immediately taken.
- ✚ Every staff person is responsible for knowing the exact count within his or her group at all times. The staff must be aware of the count throughout the entire day, as well as the individual movement of children, as they enter or leave their group.
- ✚ During group transitions to and from the classroom, (including the Community Room, the Playground Area, visiting another classroom, when taking an neighborhood walk, or a field trip), a face to name count must be taken as follows:
 1. As they prepare to leave the classroom.
 2. During the transition and upon arrival at their destination.
 3. During their outdoor play experience and while walking.
 4. When lining up in the playground at the fence and lining up at the door to enter the building.
 5. As they enter the building.
 6. Upon arrival at their classroom area and as they enter the classroom.
- ✚ When returning from the playground area, the count will be taken at the fence. The count will be taken again as the children enter the building.
- ✚ One teacher will always lead the group during the transition, after the count has been taken, while the other teacher will be responsible for keeping the order of the group, by remaining last in line. (At no time will a child be allowed to be at the rear of the line.)
- ✚ Whenever the children transition from their classroom, the teachers will be responsible for bringing their classroom emergency kit, along with the authorization and consent forms for emergency medical treatment, which is always included within the kit.
- ✚ Any time the children are taken off the premises, the teacher will take a cell phone.

Elevator Protocol

Whenever possible and in the best interest of the children, they will use the stairs.

Only Toddler Classroom 3 will use the elevator to transport their children to and from the Community Room. If for any reason it becomes necessary for any other classroom to use the elevator, they must be governed by the following elevator protocol:

- ✚ No more than four children will be allowed to enter the elevator cab, with a teacher, at one time.
- ✚ A teacher or the Director must accompany teacher aides.
- ✚ The teacher will secure the door before allowing children to enter the cab.
- ✚ The children must proceed to the rear wall of the cab.
- ✚ Once the children are in place, they must remain so until the teacher tells them to exit the cab.

- ✦ At this point the teacher, facing the children at all times, will release the door and designate the floor to which they wish to access.
- ✦ Once the door begins to open, the teacher will secure the door, until every child has exited safely.
- ✦ Once every child is safely out of the cab, the teacher will exit the cab.

Any child who behaves inappropriately and/or unsafely will not be allowed access to the elevator and must use the stairs. (This mandate does not apply to children with disabilities.)

Use of Off-site Facilities

- ✦ The educator must confirm the availability and appropriateness of off-site facilities prior to each use.
- ✦ The Center must consider and implement a thoughtful plan for appropriate supervision of the children in public spaces.
- ✦ The Program must require written parental consent for a child to participate in off-site activities. The program may obtain a general permission from the parent of each child to take the child off the premises of the childcare program for common excursions (e.g. library, playground, museums, swimming) if the consent lists the common excursions and the means of transportation. The consent form shall be valid for one year.

In House Classroom Transitions:

When it becomes apparent that it is in the best interest of a child to advance into a new classroom setting, the parents will be consulted and presented with the documentation on which this decision has been based. The parent's input, ideas and concerns will be addressed. Working together with the parents and staff, a decision will be made as to what classroom will best meet the needs of the child. Once that decision is made to transition the child into a new classroom setting, the following protocol will take place:

- ✦ Written parental permission to transition the child into a new classroom setting will be placed in the child's file.
- ✦ The staff and parents will explain to the child the reason for the transition in a manner that best meets the child's ability to understand.
- ✦ The child will be introduced to the new classroom staff and environment by a series of short visits, during different times of the day.
- ✦ As the child becomes more comfortable in the setting, the lengths of the visits will be extended.
- ✦ This transition period may last one to two weeks, depending on the needs of the child. The decision to conclude the process will be made by the parents and the teachers.
- ✦ Once the child has completed the transition process, the child will be given the opportunity to say good-bye to their classmates and at that point they will assist the teacher in moving his/her storage unit and belongings into the new classroom.

Program Transitions:

Once we are made aware of the parent's intent to transition their child into a new program, the following protocol will be observed:

- ✦ When the family presents a notice of withdrawal from the program, we will assist the child and family with the transition to the best of our ability by answering questions and concerns.
- ✦ We will provide copies of the child's file at the request of the family.
- ✦ Suggestions will be offered by the staff to assist the family with the transition to a new program.
- ✦ The staff and parents will explain to the child the reason for the transition in a manner that best meets the child's ability to understand.
- ✦ The staff will support the child by providing them with the opportunity to give closure to their experience here at the Center.
- ✦ On the last day of enrollment a going away party will be given for the child and they will have an opportunity to say good-bye to their friends.

Withdrawals

A two-week notice is required if you decide to withdraw your child from the program. After leaving the Center items from the individual's cubby will be stored for two weeks. After that period of time the items will be disposed of, as storage space is limited.

Child Guidance Policy

The root word for discipline is derived from the word disciple—someone who follows the teachings of another. Children are not born knowing or understanding how to behave appropriately. It is guidance and support parents provide from the beginning of life that WCCC values and intends to build upon in the Center. Guidance and support by caring and supportive adults helps children to learn how to understand and manage their feelings, as well as cope with the challenges that are posed each day as they encounter other people and situations. Through these interactions children are helped to learn appropriate ways to express their satisfactions, needs and a wide range of feelings.

Since the learning of self-control and discipline takes time and can vary according to a number of factors, such as a child's temperament, the WCCC staff expects to work closely and consistently with children and families. As inner controls continue to develop children are helped to live harmoniously and peacefully with one another. Learning to tolerate limits and understanding the consequences of their own actions contribute to healthy emotional and social development. Of particular importance to the WCCC staff is separating the deed from the idea. By doing so no child is made to feel ashamed, embarrassed or bad.

Another aspect of the learning process is to respect and care for others. Opportunities to learn how to use materials respectfully are also essential.

The Wollaston Child Care Center follows and implements The Pyramid Model, a positive behavioral intervention and support (PBIS) framework that uses systems-thinking and implementation science to promote evidence-based practices. We strive to provide nurturing and responsive caregiving, create learning environments, provide targeted social-emotional skills, and support children with challenging behavior. When needed we offer referrals to area programs and services for additional support.

The Wollaston Child Care Center prohibits the following:

- (a) Spanking or other corporal punishment of children;
- (b) Subjecting children to cruel or severe punishment such as humiliation, verbal or physical abuse, neglect, or abusive treatment; including any type of physical hitting inflicted in any manner upon the body, shaking, threats, or derogatory remarks;
- (c) Depriving children of outdoor time, meals or snacks; force feeding children or otherwise making them eat against their will, or in any way using food as a consequence;
- (d) Disciplining a child for soiling, wetting, or not using the toilet; forcing a child to remain in soiled clothing or to remain on the toilet, or using any other unusual or excessive practices for toileting;
- (e) Confining a child to a swing, high chair, crib, playpen or any other piece of equipment for an extended period of time in lieu of supervision; and
- (f) Excessive time-out. Time-out may not exceed one minute for each year of the child's age and must take place within an educator's view.

The staff will redirect a child when they are unable to support him/her in resolving a conflict. If it becomes necessary to remove a child from his/her classroom setting due to their inability to control their actions or behaviors, the child will be brought to a member of the Administrative Team, until such time the child is able to return to the classroom.

If the child is being aggressive or physical toward the children in the classroom and/or the staff, the parents will be notified, and the Procedure for Avoiding Suspension and Termination will be implemented.

Procedures for Avoiding Suspension and Termination

It is the policy of WCCC to make every effort to avoid suspension or terminating a child from the program due to challenging behavior. The procedures to avoid suspension and termination include:

1. WCCC provide an opportunity to meet with parents to discuss options other than suspension or termination;
2. WCCC will offer referrals to parents for evaluation, diagnostic or therapeutic services;
3. WCCC will pursue options for supportive services to the program, including consultation and educator training;
4. WCCC will develop a plan for behavioral intervention at home and in the program.
5. In extreme situations when behavior poses as safety risk to the child, other children, or staff of the Wollaston Child Care Center the child may be suspended or terminated from the program.

Termination and Suspension Policy

In the event of extreme behavior that poses a safety risk to the child, other children, or staff of the Wollaston Child Care Center, the child may be suspended or terminated from the program. Other reasons for suspension and termination include disrespectful or discriminatory comments towards the staff, other children or parents, failure to pay tuition, failure to submit required paperwork, multiple late pick – ups, special services that the center cannot accommodate and refusal to comply with center policies.

1. If and when it becomes necessary for a child to be terminated, the parent(s) will be provided with an opportunity to meet with a member of the Administrative team to discuss the reason for the decision. At that point we will provide a written documentation of the circumstances leading to this decision and the efforts that were made to accommodate the child's needs prior to the termination/suspension. Whenever possible, the family will be given a two-week notice before services are terminated.
2. When any child is terminated from the program, initiated by the program or the parent(s), the child's teachers will prepare the child for the transition from the program in a manner consistent with the child's ability to understand.

Conflict Resolution Procedure

For purposes of these guidelines, a grievance is a complaint or conflict over an alleged violation of an approved procedure or practice as stated within the Policies and Procedures Handbook and the Family Handbook of Wollaston Child Care Center. Before a child can be enrolled in this Center, either one or both parents or guardians must attend a meeting where the policies and procedures of this Center are explained in detail. This meeting is scheduled for a minimum of forty-five minutes. An agreement must be signed by the parents/guardians and placed in each child's file at the time of enrollment, stating that all policies and procedures have been explained fully and that they will abide by set policies. Our Board of Directors has approved the policies of WCCC and copies of the policies are on file with the Department of Early Education and Care, through which all Child Care Centers in Massachusetts are licensed.

- ✚ **Family's Issues Regarding Policies:** After a period of time, families may forget certain policies, especially those that affect them on rare occasions throughout the year. If a family should take issue with a policy, they will be given a copy of the policy in question and invited to discuss the issue with the Director. If their concern is not settled to the satisfaction of all parties, the Director may ask the advice of the Department of Early Education and Care.
- ✚ **Family's Concerns:** If a family member/guardian should have a concern regarding the program's philosophy, curriculum, or any other issue that might arise, speak to the Director immediately. If necessary an appointment will be made at a time that is convenient for all participants, including family members/guardian, the Director and when applicable, the classroom's teacher. If the situation mandates the Director will call in a consultant or another outside resource to help evaluate the situation.
- ✚ **Family Resource:** If at any time a family has a serious concern or problem they should contact the ***Department of Early Education and Care, located at 1250 Hancock Street, Quincy, MA 02169. The phone number is 617-472-2881.***

If at any time, family members/guardians concerns and/or complaints are not settled satisfactorily with the mediation process, they may appeal in writing to the Wollaston Lutheran Church Council/Board of Directors, 550 Hancock Street, Quincy, Massachusetts 02170.

Health Care Policy

Health Care Consultant

Maddie Hao, M.D., South Cove Community Health Center, 88 Holmes Street, Quincy, MA 02171.
Telephone Number: 617-318-3210.-259
Karen Lynch, 136 Franklin St. East Bridgewater, MA 774-259-1761

Emergency Telephone Numbers

Rescue - 911 Poison Control Center – 617-232-2120
Fire Department – 617-773-9800 Police – 617-479-1212

Hospital Utilized for Emergencies (unless otherwise determined by Emergency Responders)

Quincy Medical Center, 114 Whitwell Street, Quincy, MA 02169.

Whenever children are taken on a Field Trip or off Center property, a cell phone will be taken with the group and the number left at the front desk.

Procedures for Emergencies, Injuries, (Including Dental) and Illnesses

1. All staff will be trained in the program's emergency and evacuation procedures, in standard precautions and designated staff will be trained in medication administration procedures.
2. The staff will maintain current CPR and First Aid certification, ensuring that staff trained in First Aid and CPR are present at all times. 7.11 (1) a
3. Only trained members of the staff will be allowed to give first aid.
4. When necessary 911 will be dialed for emergency support and/or transportation.
5. Parent(s) will be contacted, or emergency contacts will be called, if parents are unavailable.
6. A member of the Administrative Team or the child's teacher will be transported to the hospital, along with the child's or the adult's records, and will remain with the child/adult until a parent arrives.
7. First Aid and Emergency Medical Care Consent Forms, along with the children's records, will accompany the Staff whenever the children leave the Center's property while in our care.
8. In the event that a tooth is knocked out, the tooth will be placed in a container of cold milk and it will be transported with the child to the Quincy Medical Center.
9. Off site emergencies and injuries:
 - ✚ Emergency forms and necessary medical equipment will be taken on every field trip and neighborhood walk.
 - ✚ At least one teacher will be in possession of a cell phone.
 - ✚ Each classroom will bring their own emergency kit with them to assist in taking care of small injuries.
 - ✚ In the event of an emergency the staff will call 911 immediately, then they will call the Center. The Director or Assistant Director will make arrangements to meet at the site of the emergency and be transported with the child, if necessary.
 - ✚ Parents/guardians will be notified once the emergency personal has assessed the situation.

Procedures for Utilizing and Maintaining First Aid Equipment

1. First Aid Kits are located in each classroom and in the health room. Classroom teachers are responsible to notify the director of any items in need of replacement. Their contents include:

Band-Aids	Disposable non-latex gloves
Gauze Pads	Gauze Roller Bandage
Adhesive Tape	Instant Cold Pack
Tweezers	Thermometer
Scissors	CPR face shield

2. A First Aid Kit is taken whenever a group travels to the playground or leaves the property. A cell phone is taken whenever a group leaves the property.
3. Every teacher is certified to administer First Aid and at least one staff member on duty at all times is trained to administer CPR.

First Aid Procedures for Injuries

1. Teachers must put on disposable gloves.
2. The affected area is washed with soap and water and a Band-Aid will be applied if necessary.
3. Any child in the center with an open cut or scratch will have the affected area covered until it has scabbed over completely.
4. The child's parents will be contacted if the Center's staff deems it appropriate. If parents are not contacted at the time of the incident, they will be informed, both verbally and in writing, via an injury report at the time of pick up.

Plan for Emergency Evacuation of the Center

1. Separate evacuation plans are posted in each classroom and Center exits.
2. Classroom teachers are responsible for leading their own class out of the building.
3. An Administrative Team member is responsible for checking for stragglers.
4. An Administrative Team member, supported by the teachers, is responsible for assuring the number of children in attendance to the number of children safely evacuated.
5. The Administrative Team is responsible for assuring that evacuation drills are held at different times during the program, and are practiced with all groups of children and staff on a monthly basis. The evacuation plans for the Fire Drills are posted in each Classroom.
6. The Administrative Team will maintain the documentation of the date, time, and effectiveness of each drill. Each classroom has their own Fire Drill Log Book and documents the date, time, effectiveness and exit used.

Contingency Plans for Fire, Natural Disaster, Loss of Water, Heat, or Power

In the event of an emergency situation that requires an evacuation of Wollaston Child Care Center, one of the following plans shall be implemented. In all situations, the caregiver in charge when evacuating shall take:

- An accurate attendance list.
 - A count of all children and staff as they board/depart vehicles, if applicable.
 - Bring any necessary medication/supplies and emergency records.
 - A cellular telephone if available for emergency notifications.
1. If the emergency is confined to the IMMEDIATE AREA of the child care facility, e/g. fire, loss of power, loss of water, loss of heat, or hazardous materials release, and the children cannot remain on the premises, the children will be re-located to the Fenno House, 540 Hancock Street, Quincy, MA 02170, by foot. The walking route is as follows:

We will exit the building, turning left on Weston Avenue and proceed to Linden Street. Cross Linden Street, turn right and proceed to the traffic light on the corner of Linden Street and Hancock Street. Cross Hancock Street and go directly into the Fenno House located at 540 Hancock Street. The

children will remain at this location accompanied by their caregivers while parent(s)/emergency contacts are notified of the situation and arrangements are made for either the transporting home or care taking for the remainder of the day.

2. In a more widespread emergency such as flood or hazardous materials accident requiring evacuation away from the Center and surrounding area, the children will be brought to North Quincy High School, 318 Hancock Street, North Quincy, MA 02171, by Public Transportation arranged by the City of Quincy Emergency Management Department, where they will remain accompanied by caregivers for the remainder of the day.
3. In the event of a major emergency that necessitates a large-scale evacuation involving the places of safety listed above, evacuation arrangements will be coordinated by the City of Quincy Emergency Management Department to locate places of safety that can safely accommodate the children and care giving staff. This will be provided to parent(s) emergency contacts so that arrangements for transportation home or continued care can be made.

Injury Prevention

1. Liquids, foods, and appliances that are or become hot enough to burn a child must be kept out of the reach of children.
2. The use of any substance that may impair the educator's alertness, judgment or ability to care for children during child care hours is prohibited.
3. Drinking alcoholic beverages and smoking on the childcare premises during childcare hours are prohibited.
4. WCCC will ensure that the following are easily and readily available at all times, and accompany the children anytime they leave the facility in the care of staff:
 - a. a first aid kit;
 - b. current family contact information;
 - c. emergency or life-saving medications, such as asthma inhalers and epinephrine auto-injectors, for any children for whom they have been prescribed;
 - d. telephone numbers for emergency services;
 - e. authorization for emergency care for each child.
5. WCCC will maintain adequate first aid supplies, including but not limited to: adhesive tape, band aids, gauze pads, gauze roller bandage, disposable non-latex gloves, instant cold packs, scissors, tweezers, thermometer, and CPR mouth guard.
6. WCCC will maintain a record of any unusual or serious incidents including but not limited to behavioral incidents, injuries, property destruction or emergencies. These reports must be reviewed, by the Administration, on a monthly basis.
7. The staff will be responsible for checking the children's clothing to ensure that it is free from strings, laces or jewelry that could become entangled or wedged in the playground equipment and present a strangulation hazard.
8. Staff members are required to protect children against cold, heat, and sun injury.

Oral Health Policies and Procedures

Early attention to good dental hygiene and care is extremely important to the development of your child. We advise our families to have their children's dental health overseen by a dentist of their choice. If your family does not have a dentist, a list of local dentists will be provided to you. We recommend that children brush their teeth in the morning, after lunch and before going to bed at night.

Here in our Center, we encourage our children to brush their teeth after lunch each day. We will provide the children with new toothbrushes every three months and they will also provide *Colgate Fluoride Toothpaste* for children over two years of age. Fluoride free toothpaste will be offered to the children in the Toddler Program. Our staff will be on hand to assist them in applying the toothpaste to their toothbrush and will guide them in

proper brushing and rinsing techniques. Often young children tend to swallow before rinsing. Therefore, if you prefer to have you child use the toothbrush with just water it is perfectly acceptable. However, if you do not wish your child to participate in the tooth-brushing program, be sure to notify us in writing.

Plan for Safeguarding Children with Nut Allergies

Due to the ever-increasing amount of children who enter our program with severe nut allergies, we have declared this program to remain nut free at all times. Therefore, we will not purchase items that have been manufactured by equipment that may have processed nuts. We also request that our families refrain from sending in any products that include nuts or ingredients that may have been in contact with nuts or nut by-products.

Children's Sensitivities to Insects

We will follow the children's pediatrician's recommendations for those who are highly sensitive to insects. Once doctor's standing orders are in place, and the parents have signed consent forms, we will only apply repellents containing DEET once a day, and/or address insect bites by applying topical cream, or oral Benadryl as directed by the physician. ***(Standing orders must be on file to apply these products.)***

When the staff considers that the outdoor play area needs to be restricted due to insect population, the children will use the Community Room for Gross Motor Activities.

Plan for Meeting Health Standards and Food Preparation Regulations

Families often wish to contribute food items for special occasions, such as their child's birthday and holiday parties. Due to the vast numbers of children who have allergies to certain food products, we cannot accept items prepared at home. It is also one of our goals to eliminate candy from being brought into the Center in the children's lunch boxes and for party treats. When purchasing items from a store or a bakery, the ingredients must be labeled on the outside of the sealed packaging. All items donated to the classrooms must arrive in an unopened sealed package, listing all the ingredients. If the labeling implies that the equipment used during the process may have been used to process nuts or nut by-products, we will be unable to serve that product.

Sun Safe Policy

Skin cancer is increasing in the United States and has reached epidemic proportions. Ninety percent of all skin cancers are caused by exposure to the sun. According to the Skin Cancer Foundation statistics, one in every four Americans will develop skin cancer in their lifetime. Baring this fact in mind, we have developed our Sun Safe Policy.

- ✚ We encourage our staff and parents to role model sun protection behaviors at all times.
- ✚ We recommend the use of sunscreen with SPF 15 or higher, with UVA & UVB protection.
- ✚ Parents are requested to sunscreen their child/children before coming to the Center each morning.
- ✚ Parents/guardians that request their child/children to have sunscreen applied before going outside in the afternoon must supply and label the product with their child's name and sign the authorization and consent form.
- ✚ The staff is responsible for applying sunscreen to the children before going outside in the afternoon.
- ✚ Classrooms going outside between the hours of 11:00 a.m. to 12:00 p.m. and 2:30 p.m. to 4:00 p.m. will limit their time in the direct sunlight to no more than 30 minutes. (Children are not outdoors between the hours of noon and 2:30 p.m.)
- ✚ Children and staff are encouraged to wear hats, sunglasses and to keep their skin covered as much as possible.
- ✚ Children and staff are encouraged to seek shade whenever possible.

Our Policy reflects the views of the Shade Foundation's recommendations. To find out more about this organization go to their web site, www.shadefoundation.org.

In accordance with the Massachusetts Child Care Weather Watch, the following standards will be observed.

Heat Index

- 80 degrees is considered comfortable.
- 90 degrees will begin to feel uncomfortable and children will only be allowed outside to play in shaded areas for short periods of time. Otherwise they will use our indoor, air-conditioned Community Room for Gross Motor Activities.
- 100 degrees is considered uncomfortable and may be hazardous, therefore children will only be allowed to use our indoor, air-conditioned Community Room for Gross Motor Activities.

Wind-Chill

- 30 degrees is chilly and generally uncomfortable. Children may go outside, only when they are dressed appropriately for the existing weather conditions.
- 15 – 30 degrees is cold. When the entire class is dressed appropriately, children may be allowed outside for a short period of time to exercise before proceeding to the Community Room for Gross Motor Activities.
- 0-15 degrees is very cold and therefore the children will use the Community Room only for Gross Motor Activities.

Plan for the Care of Mildly Ill Children and Management of Infectious Disease

1. In order to minimize the spread of infectious diseases and to care for children exhibiting such symptoms, a space will be provided for their isolation in the Health Room.
2. Any child having symptoms such as a temperature that exceeds 100 degrees or discomfort due to a cold or flu, sunburn with blisters, constipation, diarrhea, ear infection, etc., or who is otherwise unable to participate in scheduled programming, will be sent home. Children should be picked up within two hours after notification.
3. Children exhibiting symptoms requiring exclusion will be made comfortable in the Health Room until they can be picked up.
4. **Any child sent home ill/sick from the program must be out for a full 24 hours and free of symptoms for 24 hours before returning to the Center.**
5. Parents are obligated to notify the Center when their child has had a communicable disease. Any child having a communicable disease must have a doctor's note before being readmitted to the Center. Parents will be notified when any communicable disease such as measles, pediculosis (Head Lice), or salmonella has been introduced into the Center.
6. Once a child has been found to have pediculosis (Head Lice), it is the policy of this Center that the child may not return until all nits have been removed from the hair. **This Center has a no nit policy!**

Children are considered ill when they are unable to participate fully in all aspects of the Center program, including indoor as well as outdoor play. Our Health Care Consultant can be contacted at anytime to answer questions and assist parents regarding health needs for the children and/or the family.

Parents are expected to contact the Director to determine the status of their child's health if there is a question of illness. Keeping a child at home for one or two days at the beginning of an illness can often prevent a longer absence later. Also, by avoiding contact with other children, it might be possible to reduce illness among other children and staff.

However, if you contact the Director and it is determined that your child is well enough to attend, it is also assumed that you or a designated person will be available to take your child home if his/her health deteriorates during the day

Plan for Dispensing Medication

Only staff members trained to verify and to document that the right child receives the proper dosage, of the correct medication, for that particular child and given at the correct time(s), and by the proper method. Each

staff member who administers medication (other than topical medication) must demonstrate competency in the administration of medication before being authorized by WCCC to administer any medication. The staff that is allowed to administer medication must complete the training in Five Rights of medication distribution yearly.

- ✚ The Administration will ensure that at least one person with training in medication administration is present at any and all times when children are in care.
- ✚ Each staff member who administers any medication, other than oral or topical medications and epinephrine auto-injectors, must be trained by a licensed health care practitioner and must demonstrate annually to the satisfactions of the trainer, competency in the administration of such medications.
- ✚ WCCC will ensure that each educator, including those educators who do not administer medications, receives training in recognizing common side effects of specific medications being administered in the program.

1. **Non-prescribed medication** will only be administered when accompanied by a physician's written order. The written order must specify the child's name, the medication name, the dosage, time to be administered, the duration and reason being given with parameters.

Example: Child's name, Robitussin 1tsp, by mouth every 4-6 hours for a cough. To follow up with MD if not improved in 4 days.

Non-prescribed medication will not be given to children by the Administrative Staff or parents, while attending the program, without the physician's authorization! Non-prescribed medication can mask symptoms of contagious illnesses that can quickly spread throughout the Center. It is for this reason that we must strictly adhere to this policy.

2. Any child who needs a **prescribed medication** for any reason must be on the medication for 24 hours and symptom free before returning to the Center.
3. Medication that has been prescribed by a physician may be given to the child while at the Center, as long as the following procedures are taken:
 - ✚ The medication is brought in its' original container with the prescription label attached by the child's parents/guardian.
 - ✚ The Authorization form for Administering Medication is filled out and signed by the parent/guardian. This form will be maintained by the Administrative Staff and placed in the child's file when completed. The information documented will be as follows:
 - The child's full name.
 - The name of the medication.
 - The correct dosage to be given.
 - The time when the medication is to be given.
 - The right method used to administer the medication, along with the appropriate dosing tool.
 - The parent's signature of consent.
 - The beginning and ending dates that the medication will be given.
 - ✚ An accurate measuring utensil (i.e. measuring spoon or measuring cup) must be brought with the medication.
4. All medication must be handed directly to a staff member.
5. Medication will be stored in a secured cabinet within the Health Room. Any medication needing refrigeration will be stored in the kitchen refrigerator located on the main floor.
6. When having a prescription filled, most pharmacies will divide the prescription into two containers, both properly labeled. This will enable you to leave one bottle at the Center. It is our understanding that there is no added cost for this service.
7. Leftover or out dated medication will be returned to the parent or disposed of appropriately in conjunction with the FDA guidelines.
8. A physician may give a standing order listing the medication(s), dosage and criteria for administration. This order will be valid for **no more than one year** from the date it was signed. When a child with standing orders receives medication as needed, the parent(s) will be notified by phone or written notice stating the date and time the medication was administered.

9. Each time medication is given it will be documented in the **Medical Records Book**, located on the desk in the **Health Room**. The person administering the medication will document the time the medication was given, the name of the medication, the dose administered, and the staff person's name.
10. The parents will be informed of any child with standing orders before administering medication.
11. The parent(s) will be informed any time a dosage is missed, or refused by the child.
12. Only staff member who have completed the DEEC On-line Medication Administration Training (The Five Rights) will be allowed to administer medication
13. At the request of a parent or guardian the Staff will apply topical medications, such as diaper cream or hand cream, for a period of five days. If at that point there has been no improvement or the parents/guardians wish to have these medication extended, a doctor's note will be necessary to continue any treatment.
14. Sunscreen lotion, insect repellent, with DEET, chap stick, diaper cream, hand cream and other topical creams or ointments must be accompanied by an authorization and consent form signed by the parent/guardian. In the event of an open wound or broken skin, a physician's order will be required.

Plan for Implementation and Monitoring Infection Control

- a) All staff members will be trained in infection control procedures.
- b) The staff will educate children about and promote hand washing procedures and health precautions.
- c) The staff will ensure that educators and children wash their hands with liquid soap and running water, using friction, in accordance with DPH guidelines. Hands must be dried with individual or disposable towels or automatic hand blow-dryers. The use of common towels is prohibited. Staff and children must wash their hands at least at the following times:
 - Before and after water play;
 - Before eating or handling food;
 - After toileting or diapering;
 - After coming into contact with bodily fluids or discharges (including sneezes, coughing); and
 - After handling caged animals or their equipment.
- d) In addition, staff must wash their hands:
 - Before and after administration of medication;
 - After performing cleaning tasks, handling trash or using cleaning products.
- e) Facilities used for hand washing after diapering or toileting must be separate from facilities and areas used for food preparation and food service.
- f) WCCC will ensure that equipment, materials, items or surfaces (including floors, walls and clothing used for dramatic play) are washed with soap and water and disinfected as needed to maintain a sanitary environment.
- g) All floors used by children must be swept and/or vacuumed daily.
- h) All eating surfaces be washed and disinfected before and after each use.
- i) Where applicable, the following items, equipment and surfaces must be washed and disinfected after each use:
 - 1) Children's toileting facilities.
 - 2) Diapering surfaces;
 - 3) Mops used for cleaning bodily fluids;
 - 4) Thermometers; and
 - 5) Water tables and water play equipment.
(WCCC uses disposable bibs in the Toddler classroom.)
- j) Toys mouthed by children must be set aside and stored after each use and may not be used by another child until they are washed and disinfected.

- k) Personal items intended for individual use by children, including but not limited to toothbrushes and sleeping materials, must be labeled with the name or numbered for whom they are intended.
- l) The following items must be monitored for cleanliness and washed and disinfected at least daily:
 - 1) Toilets and toilet seats;
 - 2) Containers, including lids, used to hold soiled diapers;
 - 3) Sinks and sink faucets;
 - 4) Drinking fountains;
 - 5) Play tables and
 - 6) Washcloths and towels.
- m) The following must be washed and disinfected at least weekly:
 - 1) Cribs, cots, mats and other approved sleeping equipment;
 - 2) Sheets, blankets or other coverings;
 - 3) Machine washable toys.
 - 4) Smooth surfaced, non-porous floors, and
 - 5) Mops used for cleaning.
- n) The disinfectant solution used to disinfect child care items, equipment and surfaces is a bleach solution prepared by WCCC staff in accordance with EEC guidelines.
- o) All disinfectant solutions must be stored in accordance with EEC regulations and kept out of the reach of children. The bleach solution used as a disinfectant will be made fresh at the beginning of each day.
- p) WCCC will provide disposable non-latex gloves to be used for clean-up of blood and bodily fluids. The affected area will be disinfected. Used gloves and any other materials containing blood or other bodily fluids must be thrown away in a lined, covered container. WCCC will ensure that the staff wash their hands thoroughly with soap and water after cleaning up the contaminated area. Contaminated clothing will be sealed in a plastic container or bag, labeled with the child's name and returned to the parent at the end of the day.
- q) WCCC will ensure that when individual towels or washcloths are used for any purpose they are stored open to the air and not touching each other.

Personal Hygiene

- a) All staff members must model and follow good personal hygiene practices at all times.
- b) The staff members must ensure that when each child is washed, an individual, labeled washcloth or disposable materials are used.
- c) WCCC will have available sufficient clean and dry indoor and outdoor clothing to change a child's clothing or for a child to change his/her own clothing when wet or soiled and will ensure that children are dressed appropriately for the weather and for indoor and outdoor program activities. Clothing must be washed after each use.
- d) The staff must assist children in brushing their teeth whenever they are in care for more than four hours, or whenever they consume a meal while in care.
- e) The children must use individual, labeled toothbrushes, which will be stored in a safe and sanitary manner open to the air without touching each other.
- f) Toothbrush holders will be cleaned and sanitized once a week, or whenever deemed necessary.

Diapering and Toileting

When serving children who are under two years and nine months of age, and/or not toilet trained, the educator must ensure that:

- a) A change of clothing is available for each child;
- b) Diapering areas are separate from facilities and areas used for food preparation and food service;
- c) A supply of clean, dry diapers adequate to meet the needs of the children is maintained;

- d) A common changing table or diapering surface is not used for any other purpose:
- e) The changing surface is smooth, intact, and impenetrable to water and easily cleaned and disinfected after each use.
- f) Each child's diaper is changed on a regular basis throughout the day and when wet or soiled;
- g) The changing surface is protected with a covering that is of adequate size to prevent the child from coming in contact with the changing surface;
- h) Staff wash their hands with liquid soap and running water using friction and dry their hands with individual or disposable towels after diapering a child;
- i) The staff will keep at least one hand on the child at all times when the child is being changed on an elevated surface;
- j) Each child is washed and dried with individual washing materials during each diaper change. After changing, the child's hands must be washed with liquid soap and water, and dried with individual or disposable towels;
- k) Soiled disposable diapers are placed in a closed container that is lined with a leak-proof disposable lining. Soiled diapers must be removed from the program daily, or more frequently as necessary:
- l) Soiled non-disposable diapers are placed in a sealed plastic container labeled with the child's name and returned to the child's parents at the end of the day.
- m) Children are toilet-trained in accordance with the requests of their parents and consistent with the child's physical, emotional, and developmental abilities.

Sanitizing

1. Specified equipment, items, or surfaces will be washed with soap and water and disinfectant by either staff or maintenance department using the following schedule.

Before/After each use

- Tables used for eating

After each use

- Mops used for cleaning body fluids
- Thermometer without covers

At least daily

- Toilets and toilet seats
- Sinks and sink faucets
- Drinking fountains
- Water tables and water play equipment (When necessary to change for health reasons.)
- Play tables
- Counter tops
- Smooth surfaced, nonporous floors
- Mops used for cleaning

At least monthly or more frequently as needed to maintain cleanliness when wet or soiled and before use by another child

- Mats
- Blankets and pillows
- Dramatic play clothing
- Toys and equipment
- Storage units and furniture
- Machine washable fabric toys
- Parents are responsible for laundering their child's personal blankets, pillows, and clothing

2. The disinfectant solution shall be either a self-made bleach solution or a commercially prepared disinfectant that has been registered by the Environmental Protection Agency (EPA) as a sanitizing solution (registration can be identified by reading the product label and using the disinfectant precisely as directed on the label). Bleach solutions will be made using guidelines in TA-OCCS-01.
3. The Center will provide disposable gloves to be used for the clean-up of blood and bodily fluids. The affected area(s) shall be disinfected. Used gloves shall be thrown away in a lined, covered container. Staff will wash their hands thoroughly with soap and water after cleaning up the affected area(s). Soiled clothing shall be sealed in a plastic container or bag, labeled with the child's name, and returned to the parent at the end of the day.
4. All cleaning supplies and disinfectants shall be stored in a secure place and out of the reach of children.
5. All staff will be trained in infection control procedures during yearly training of OSHA requirements, as a segment of our First Aid Training program. New employees will address this training during the intake procedure.

Sleep, Rest and Quiet Activity

- a) WCCC will provide an opportunity for children to rest or engage in quiet activities when in care for more than four hours.
- b) During sleep, rest or quiet activities the staff must ensure that children are easily accessible during an emergency.
- c) Restraints may not be used on sleeping children under any circumstances.
- d) WCCC will include, as part of the daily schedule, an extended period of sleep, rest or quiet activities for children in care longer than four hours.
 1. The length of the sleep, rest or quiet activity period must be appropriate to the needs of the children.
 2. When children choose not to sleep or awaken early, they must be offered quiet activities for the remainder of the sleep or quiet activity period.
 3. WCCC will:
 - a) Minimize noise and disturbance;
 - b) Provide a separate mat, and blanket for each child present at any time during the day;
 - c) Provide sleeping materials that are individually marked and in good repair and clean; and
 - d) Ensure safe and sanitary storage of blankets and bed linens.
 4. The staff will ensure that:
 - a) There is a distance of at least two feet between each mat, or there is a distance of at least three feet between children's faces while resting or napping;
 - b) There is appropriate space and adequate lighting for quiet activities for children who do not sleep;
 - c) There is adequate lighting to allow proper supervision.
 - d) This program does not serve infants or children under fifteen months of age.

Requirements for Pets

- a) When WCCC has pets in the program, we will ensure that they are appropriate for children in our care. Before introducing a pet to the program, we will consider the effect on the children's health and safety, including possible allergies, and notify parents in advance, or prior to the child's enrollment.
- b) The staff will closely supervise all interactions between children and animals and instruct children on safe behavior when in close proximity to animals.
- c) When pets are kept in the Center, the staff must:

- 1) Ensure that animals, regardless of ownership, are free from disease and parasites and are licensed and/or vaccinated as prescribed by law;
 - 2) Not allow children to take part in the cleaning of the animal's cage;
 - 3) Keep litter boxes inaccessible to children;
 - 4) Ensure that pets are kept in a safe and sanitary manner.
- d) Children must not come into physical contact with reptiles. Reptiles in the program must be kept in accordance with Department of Public Health Guidelines.

Confidentiality and Distribution of Records and Information

Information pertaining to children and their families is privileged and confidential. WCCC or staff members will distribute or release information about a child or his/her family to any unauthorized person, or agency,, or discuss with any unauthorized person information about a child or his/her family without the written consent of the child's parent. The child's parent(s), at reasonable times, must, upon request, have access to everything in his or her child's record.

Individual Health Care Plans

WCCC must maintain, as part of a child's record, an individual health care plan for each child with a chronic medical condition, which has been diagnosed by a licensed health care practitioner. The plan must describe the chronic condition, its symptoms, any medical treatment that may be necessary while the child is in care, the potential side effects of that treatment, and the potential consequences to the child's health if the treatment is not administered.

Only qualified staff may administer routine, scheduled medication or treatment to the child with a chronic medical condition in accordance with written parental consent and licensed health care practitioner authorization.

1. Notwithstanding the provisions of 606 CMR 7.11 (l)(b) 2., the staff must have successfully completed training, given by the child's health care practitioner, or, with his/her written consent, given by the child's parent or the program's health consultant, that specifically addresses the child's medical condition, medication and other treatment needs.
2. In addition to the requirements for the routine scheduled administration of medication or treatment, any unanticipated administration of medication or unanticipated treatment for a non-life-threatening condition requires that the educator must make a reasonable attempt to contact the parent(s) prior to administering such unanticipated medication or beginning such unanticipated treatment, or, if the parent(s) cannot be reached in advance, as soon as possible after such medication or treatment is given.
3. The educator must document all medication or treatment administration, whether scheduled or unanticipated, in the child's medication and treatment log.
4. The written parental consent and the licensed health care practitioner authorization shall be valid for one year, unless withdrawn sooner. Such consent and authorization must be renewed annually for administration of medication and/or treatment to continue.

Child with Disabilities

WCCC will make reasonable accommodations to welcome or continue to serve a child with a disability. In determining whether accommodations are reasonable and necessary, WCCC, with the parental consent and as appropriate, request information regarding the child from the Local Education Agency (LEA), Early Intervention Program or other health or service providers.

- a) Based upon available information WCCC, with the parent's input, will identify in writing the specific accommodations required to meet the needs of the child. Including, but limited to:
 - Any modifications in the child's participation in regular program activities:
 - The size of the group to which the child may be assigned and the appropriate staff/child ratio; and

- Any special equipment, materials, ramp or aids needed to serve the child
- b) WCCC will provide written notification to the parent within 30 days of the receipt of authorized and requested information, if, in our judgment, the accommodations required by 606 CMR 7.04(13) to serve the child are not reasonable or would cause an undue burden to the program.

Abuse or Neglect

1. Child abuse is damage to a child for which there is no “reasonable” explanation. Child abuse includes non-accidental physical injury, neglect, sexual molestation, and emotional abuse.
2. When documenting observations, staff will include date, time, and specific circumstances relating to the observation. Staff will share these documented observations with the Administrative Team.
3. All staff are mandated reporters and shall report suspected child abuse or neglect. A verbal report shall be made either to the Center’s Administrative Team or to the Department of Children and Families. The Center’s Administrative Team shall immediately report suspected child abuse or neglect to:

Department of Children and Families

Coastal Area Office

220 Forbes Road Rear, Suite 117

Braintree, MA 02184

Telephone # (781) 794-4507

24-Hour # 1-800-792-5200

4. Any allegations involving a staff member regarding abuse or neglect will be reported immediately to the Department of Children and Families and to the Department of Early Education and Care. The staff member will be removed from care of children until the EEC and DCF investigations are completed and/or approval for him/her to return has been obtained by EEC.
5. Staff who report suspicions of child abuse or neglect will be immune from discharge, retaliation, or disciplinary action.
6. The Center shall cooperate in all investigations of abuse and neglect, including identifying parents of children currently or previously enrolled in the program; providing consent for disclosure to the EEC of information, and allowing the EEC to disclose information to any person and/or agency the EEC may specify as necessary to the prompt investigation of allegations and protection of children.
7. After the investigation the staff member may, or may not, be reinstated pending the decision of the Administrative Team.

Plan for Referral Services

The following is a plan describing procedures for referring parents to appropriate social, mental health, educational and medical services, including but not limited to dental check-up, vision or hearing screening, for their child should the Center staff feel that an assessment for such additional services would benefit the child:

1. The staff is responsible for informing the Administrative Team of their concern(s).
2. Teachers will observe and record the child’s behavior. These records will be reviewed with the Administrative Team before a referral decision is made.
3. A teacher and/or a member of the Administrative Team will meet with parents to share the Center’s concerns and plan ways to work together.
4. A current list of referral resources in the community for children in need of social, mental health, educational or medical services will be provided, along with the contact person for St.1972 c. 766 and Early Intervention Program referral.
5. The Center will provide written notice to the appropriate administrator of special education that WCCC is serving a child with a disability, if the child is 2 years and 9 months old or older.

6. The Center will provide written notice to the administrator of the DPH Early Intervention program when serving a child with a disability, if the child with a disability who is younger than two years and nine months old.

Parent Preference Update

As a Child Care Center it is important to us that we are meeting the informational needs of our families. Each family will receive a monthly calendar or newsletter outlining the curriculum set for the following month by the classroom teachers. You will also receive a monthly newsletter from the Director listing upcoming events, holiday closures, educational information, special Center activities, such as our plans for the “Week of the Young Child”, the “CHIPS Program”, and our annual “Charitable Fundraisers.”

We realize that you are often inundated by the endless amount of paperwork you receive on a daily basis. We also have an obligation to be environmental friendly. Therefore, we will be using a Notebook Program to be utilized for children who are 2.9 years of age, through age 6. Each child will have an individual notebook that will be sent home each week for children who attend five full days. The notebook should be returned on the following Monday, in order for us to maintain this program. Children who attend on a part time basis will receive their notebooks on an every other week basis. Your child’s teachers will be writing individual anecdotal notes, along with personal observations regarding your child’s learning experiences while at our Center.

The children participating in our Toddler Program, under the guidelines set by the State of Massachusetts, will receive Daily Up-Dates.

Your input in identifying your personal communication preference regarding your child’s learning experiences is importance to us. Please take a moment to let us know if you prefer daily, weekly, bi-weekly up-dates, or will our Notebook Program be sufficient. Please keep in mind you can communicate daily with your child’s teachers, either when your child enters the program or before you leave in the evening. We also encourage you to feel free to call your child’s classroom teachers any day between 1:00 p.m. and 2:00 p.m. to discuss any questions or concerns that you might have regarding your child.

Parental Input:

Parent’s Signature:

Date:
